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APPLICANTS

Andy Schwammberger, Holstein, SWITZERLAND;
 Jordan Velikov, Thalwil, SWITZERLAND;

**** CONTINUING DATA *********** FOREIGN APPLICATIONS *******

EUROPEAN PATENT OFFICE (EPO) 03 007 543.6 04/01/2003
 EUROPEAN PATENT OFFICE (EPO) 04 002 710.4 02/06/2004

**** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ****

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Foreign Priority claimed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Met after Allowance MJA Initials	SWITZERLAND	10	34

ADDRESS

BAKER & DANIELS LLP
 111 E. WAYNE STREET
 SUITE 800
 FORT WAYNE, IN 46802
 UNITED STATES

TITLE

IMPLANT FOR THE TREATMENT OF BONE FRACTURES

FILING FEE RECEIVED 1752	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)

- 1.17 Fees (Processing Ext. of time)
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- Other _____
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